



Lamar County Planning Department

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SITE PLAN REVIEW APPLICATION and CHECKLIST

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Today's Date: _____

Case No.: _____

PPIN Number: _____

Name of Project: _____

Property Address of Site: _____

City

State

Zip code

Proposed Use and Description of Project: _____

This application is for (check one): ☐ New Construction ☐ Remodel ☐ Addition/Amend ☐ Concept Only

Total Fee Enclosed \$ _____ ☐ Cash-Receipt # _____ ☐ Check # _____

Project Plan Representative/Title (person(s) attending meetings): _____

Representative Name: _____

Representative Address: _____

City

State

Zip Code

Phone: Cell#

Office#

Fax#

Engineer (if different from Representative): _____

Company Name: _____

Company Address: _____

City

State

Zip Code

Phone: Cell#

Office#

Fax#

Property Owner Name: _____

Property Owner's Address: _____

City

State

Zip code

Phone: Cell#

Office#

Fax#

YOU **MUST** SUBMIT COMPLETED CHECKLIST WILL ALL APPLICATION SUBMITTALS FOR SITE PLAN REVIEW